

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18252

FILED
Apr 12, 2005
Secretary of State

Entity Name: FAITH OF INSPIRATION DELIVERANCE TEMPLE, INC.

Current Principal Place of Business:

4306 NW 7 AVE
MIAMI, FL 33142 US

New Principal Place of Business:

4306 NW 7 AVE
MIAMI, FL 33127 US

Current Mailing Address:

1286 NW 43 ST
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 65-0034782 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NORMAN, CLARA
1286 NW 43RD ST
MIAMI, FL US

Name and Address of New Registered Agent:

NORMAN, CLARA
1286 NW 43RD ST
MIAMI, FL 33142 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CLARA NORMAN

04/12/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NORMAN, F.M.,
Address: 1286 NW 43RD ST
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: NORMAN, CLARA,
Address: 1286 NW 43RD ST
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: SABB, MICHELE
Address: 431 N.W. 149 ST
City-St-Zip: MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NORMAN, F.M.,
Address: 1286 NW 43RD ST
City-St-Zip: MIAMI, FL 33142

Title: VD (X) Change () Addition
Name: NORMAN, CLARA,
Address: 1286 NW 43RD ST
City-St-Zip: MIAMI, FL 33142

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLARA NORMAN

VD

04/12/2005

Electronic Signature of Signing Officer or Director

Date